

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.

10799315

FILING DATE

03-12-01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		2				
4		2				
5		2				
6		2				
7		2				
8	1					
9		1				
10		1				
11		2				
12		2				
13		1				
14		1				
15		1				
16		1				
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47						
48						
49						
50						
TOTAL IND.	2					
TOTAL DEP.	2	1				
TOTAL CLAIMS	23	[QR]	[QR]	[QR]	[QR]	[QR]

	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						